

PTO/SB/21 (02-04)

Approved for use through 07/31/2008, OMB 0651-0031

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number 10/779,508
		Filing Date FEBRUARY 13, 2004
		First Named Inventor CLARKE, D G
		Art Unit 1743
		Examiner Name COLE, M.T.
Total Number of Pages in This Submission 4		Attorney Docket Number 5853-387

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Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name Akerman Senterfitt/Nicholas Zachariades, Reg No. 56,712 P.O. Box 3188 West Palm Beach FL 33402-3188
Signature
Date APRIL 17, 2006

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name Nicholas A. Zachariades, Reg No 56,712		
Signature 	Date APRIL 17, 2006	

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PTO/SB/17 (12-04)

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Effective on 12/02/2004.

Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEET TRANSMITTAL
For FY 2005** Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 60.00)

Complete if Known

Application Number 10779.503

Filing Date FEBRUARY 13, 2004

First Named Inventor CLARKE, D G

Examiner Name COLE, M.T.

Art Unit 1743

Attorney Docket No 5653-387

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CENTRAL FAX CENTER****APR 1 2006****METHOD OF PAYMENT (check all that apply)** Check Credit Card Money Order None Other (please identify): _____ Deposit Account Deposit Account Number 50-0951 Deposit Account Name Akerman Senterfitt

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 Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments
under 37 CFR 1.16 and 1.17

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity
Fee (\$)
Fee (\$)

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		Fee (\$)	Fee Paid (\$)
				Fee (\$)	Fee Paid (\$)		
- 20 or HP =	x	=					
HP = highest number of total claims paid for, if greater than 20							

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: ONE Month Extension of Time

Fees Paid (\$)

60.00

SUBMITTED BY

Signature	N. Teller	Registration No. 56,712 (Attorney/Agent)	Telephone (561) 653-5000
Name (Prin/Type)	Nicolas A. Zacharades	Date APRIL 17, 2006	

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